

Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

Establishment Name PIZZA KING	Telephone Number Est 812/945-4405 Own 502-376-2000	Date of Inspection 05/11/2021	ID#
Address 3825 CHARLESTOWN ROAD, NEW ALBANY IN 47150			
Owner STEVEN SCHUTZ	Purpose <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	Follow Up	Released 05/21/2021
Owner's Address 1940 APPLE BLOSSOM RD. FLOYDS KNOBS, IN 47119		Menu Type 1 _ 2 <u>X</u> 3 _ 4 _ 5 _	
Person in Charge TIM SCHUTZ			
Responsible Person's Email			
Certified Food Handler TIM SHUTZ			

CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"
VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"

Section #	C	NC	R	Narrative	To Be Corrected
229	X			Observed can opener spike with food debris.	TODAY
438	X			Observed spray bottle in mop area with no label.	TODAY
443	X			Observed quat sanitizer solution by handwashing sink to be above 400ppm.	CORRECTED
218		X		Observed damaged rubber gasket on reach in cooler.	5/31/21
232		X		Observed splatters inside of microwave.	TODAY
243		X		Observed 2 boxes of single serve cups and lids on the floor.	CORRECTED
324		X		Observed ice buildup on cooling unit in walkin freezer.	5/31/21
433		X		Observed mops not hung up properly to dry.	TODAY

Summary of Violations C 3 NC 5 R 0

Received by (name and title printed):

TIM SCHUTZ

Inspected by (name and title printed):

Christa Manus EHS

Received by (signature):

Inspected by (signature):

cc:

cc:

cc: